

STP E TAPAD
MAY 26 2006

PATENT & TRADEMARK OFFICE

Duplicate

REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Subsection (b) of 35 U.S.C. §132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA).

Application Number	10/628,259
Filing Date*	July 29, 2003
First Named Inventor	HWU et al.
Group Art Unit	1616
Examiner Name	J. Pak
Attorney Docket No.	3107-123

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

NOTE: * Filing date must be on or after June 8, 1995; but if before May 29, 2000, then consider a CPA.

1. Please consider the following as the required submission under 37 C.F.R. §1.114:

- a. The Amendment/Reply filed on _____
- b. The Information Disclosure Statement (IDS) filed on (date): _____
- c. The Brief/Reply Brief filed on (date): _____
- d. The ____ page(s) of Form PTO-1449 and copy of each listed document filed (date): _____
- e. Other: Amendment Under 37 C.F.R. § 1.116 filed herewith.
- 2. A TWO- month Petition for Extension of Time is filed herewith.
- 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17 to Deposit Account No. 501874.
- 4. Authorization is hereby given to charge Deposit Account No. 501874 in the amount of \$620 to cover the Small Entity Filing Fee (\$395) and the Small Entity Extension Fee (\$225). A duplicate of this form is enclosed herewith.
- 5. This Request is transmitted by facsimile to number (703) _____.
- 6. Other: _____

THE RCE FEE IS CALCULATED AS FOLLOWS:

Basic Fee: \$790.00

Total Claims:	7	-	20	(highest number previously paid for) =	0.00	X \$18 =	0
---------------	---	---	----	--	------	----------	---

Independent Claims:	3	-	3	(highest number previously paid for) =	0.00	X \$86 =	0
---------------------	---	---	---	--	------	----------	---

Correspondence Address: TROXELL LAW OFFICE PLLC 5205 Leesburg Pike, Suite 1404 Falls Church, VA 22041	Multiple Dependent Claim (add \$280.00):	0
---	--	---

Subtotal:	\$790.00
-----------	----------

50% Reduction if Small Entity Status:	\$395.00
---------------------------------------	----------

Phone: 703-575-2711	Fax: 703-575-2707	Total:	\$395.00
---------------------	-------------------	--------	----------

Date:	Name:	Signature:	Reg. No.:
May 26, 2006	Bruce H. Troxell		26,592

05/30/2006 SZEWDIE1 00000113 501874 10628259

01 FC:2801 395.00 DA